Filing

AW (07-03)

DECLARATION/ Attorney Docket Number: **MATI-224US** POWER OF ATTORNEY First Named Inventor: Sathya R. Narayanan et al. FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) To Be Assigned Application Number: Declaration Submitted Herewith Filing Date: Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) With Initial Art Unit To Be Assigned Examiner Name: To Be Assigned

ih rebyd	eclare that:					
	•	address, and citizenship are a				
	e inventor(s) named belo the invention entitled:	ow to be the original and first in	nventor(s) of the subject	matter which is claimed	aпd for which	a patent is
Soughton	ine invention entided:				 	
MULTI-	HOP WIRELESS NETW	ORK DATA FORWARDING				į
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L			le of the Invention)			
the specific	ation of which	(710	ie or ure invention)			
5 7 .						
⊠ is	attached hereto					
C	OR					
	as filed on (MM/DD/YYY	Y) as United States Ap	pplication or PC1 Interna	itional Application Numb	er	
and was a	mended on (MM/DD/YY)	Y) (if applicable). I he	reby state that I have re-	viewed and understand	the contents o	f the above
identified s	pecification, including the	claims, as amended by any	amendment specifically	referred to above.		
i acknowle	dge the duty to disclose i	nformation which is material to	o patentability as defined	d in 37 CFR 1.56, includi	ng for continu	ation-in-part
application	s, material information wi	nich became available betwee				
ning date o	of the continuation-in-part	application.				
		ts under 35 U.S.C. 119(a)-(d)				
of America	gnts certificate(s), or 365 , listed below and have a	(a) of any PCT international a lso identified below, by check	application which designi ling the box, any foreign	ated at least one country application for patent, in	omerman m ventor's or pla	e United States Int breeder's
rights certif	icate(s), or any PCT inter	national application having a	filing date before that of	the application on which	priority is clai	med.
Prior F	oreign Application	Country	Foreign Filing Date	Priority Not	Certified Co	opy Attached?
	Number(s)		(MM/DD/YYYY)	Claimed	Yes	No

I hereby appoint: ☑ Practitioners at Customer Number 23122 or affix Customer Number Bar Code Label here OR ☐ Practitioner(s) named below:						
Name		Registration Number				
as my/our attorney(s) or agent(s) to pro Patent and Trademark Office connected	secute the application i	dentified above,	and to tr	ansact a	Il business in the United S	tates
Direct all correspondence to: Practitioners Customer Number listed above; OR Correspondence Address Below						
Name:						
Address:						
City: St	ate:		Zip:			
Country: Te	elephone:		Fax:			
I hereby declare that all statements made belief are believed to be true; and further like so made are punishable by fine or im jeopardize the validity of the application of	that these statements w prisonment, or both, und	ere made with the der 18 U.S.C. 10	ne knowle	edge that	willful false statements and	d the
Name of Sole or First Invento	r:	☐ A Petition	has been	filed for	this unsigned inventor.	<u>"</u>
Given Name (first and middl	e (if any))		Far	nily Nam	e or Surname	
. Sathya R.				Nara	yanan	
Inventor's Signature	ki		Date: 9/11/03		_	
Residence: City: Plainsboro State: NJ		Country: USA Citizenship: India				
Mailing Address: 4604 Hunters Glen Dr	ive					
Mailing Address:						
City: Plainsboro	State: NJ	Zip: 08536		Coun	itry: USA	
Additional inventors are listed on the next page.						

Nan	ame of Second Inventor:		A Petition has been filed for this unsigned inventor.			
	Given Name (first and middle (if any))		Family Name or Surname			
	Dalsakh			Komiya		
Inve	tor's Signature			Date;		
Resid	ence: City: Yokohama-shi	State: Kanagawa	Country: Japan	Citizenship: Japan		
Maille	ng Address: 11-1-716 Ichibashimod	no				
Malli	ng Address: Tsurumi-ku					
City	Yokohama-shi	State: Kanagawa	Zip: 230-0024	Country: Japan		
Nar	ne of Third Inventor:		A Petition has been file	d for this unsigned inventor.		
	Given Name (first and middle (if any))	Family Name or Sumame			
	Rajesh B. K		Khandelwal			
Inve	Inventor's Signature Rajeh Wandl		-124	Date: 9/11/03		
Resid	lance: City: Bridgewater	State: NJ	Country: USA	Citizenship: USA		
Maili	ng Address: 1031 Buxton Road					
Maill	ng Address					
City:	Bridgewater	State: N)	Zip: 08807	Country: USA		
Nan	ne of Fourth Inventor		A Petition has been filed for this unsigned inventor.			
	Given Name (first and middle (rany))	Family Name or Surname			
	Symeon		F	apavassillou		
Inven	tor's Signature	The San	Date: 09/10/09			
Resid	ence: City: Fort Lea	State: NJ	Country: USA	Citizenship: Greece		
Maille	elling Address: 1275 15th Street					
Mailin	lailing Address: Apartment 14Q					
City:	Fort Lee	State: NJ	Zip: 07024	Country: USA		
\boxtimes	dditional inventors are listed on 1 Sup	plemental Sheat(s).				

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DECLARATION/POWER OF ATTORNEY - SUPPLEMENTAL SHEET

Page 4 of 4

Name of Additional Joint Inve	ntor, if any:	A Petition has been filled for this unsigned inventor.		
Given Name (first and middle		Family Name or Surname		
Sheng			Xu	
Inventor's Signature	Va		Date: 0 9/06/03	
Residence: City: Harrison	State: NJ	Country: USA	Citizenship; P.R. China	
Mailing Address: 627 Central Avenue				
Mailing Address: Ground Floor				
City: Harrison	State: NJ	Zip: 07029	Country: USA	
Name of Additional Joint Inve	ntor, if any:	A Petition has been fi	led for this unsigned inventor.	
Given Name (first and middle	(if any))	Family Na	me or Surname	
Inventor's Signature			Date:	
Residence: City:	State:	Country:	Citizenship:	
Mailing Address:				
Malijng Address:				
City:	State:	Zip:	Country:	
Name of Additional Joint Inve	ntor, If any:	A Petition has been filed for this unsigned inventor.		
Given Name (first and middle	(if any))	Family Name or Sumarne		
Inventor's Signature			Date:	
Residence: City: State:		Country:	Cidzenship:	
Malling Address:				
Mailing Address:				
City:	State:	Zip:	Country:	

DECLARATION/ POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
With Initial
Filing

Declaration
 Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

	Attorney Docket Number:	MATI-224US
First Named Inventor:		Sathya R. Narayanan et al.
	COMPL	ETE IF KNOWN
	Application Number:	To Be Assigned
	Filing Date:	Herewith
	Art Unit:	To Be Assigned
	Examiner Name:	To Be Assigned

I hereby declare that:					
Each inventor's residence, mailing a	ddress, and citizenship are a	s stated below next to the	eir name.		
I believe the inventor(s) named below	w to be the original and first ir	nventor(s) of the subject	matter which is claimed	and for which	a patent is
sought on the invention entitled:					
MULTI-HOP WIRELESS NETW	ORK DATA FORWARDING				
WOLTHOI WINCLESS NETV	ON DATAT ON VANDING				
the specification of which	(Titl	le of the Invention)			
is attached hereto					
OR					
was filed on (MM/DD/YYY	Y) as United States Ap	oplication or PCT Interna	tional Application Numb	er	
and was amended on (MM/DD/YYY identified specification, including the				he contents o	f the above
I acknowledge the duty to disclose in applications, material information what filing date of the continuation-in-part	nich became available betwee				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application	Country	Foreign Filing Date	Priority Not	Certified Co	opy Attach d?
Number(s)		(MM/DD/YYYY)	Claimed	Yes	No

I hereby appoint: Practitioners at Customer Number 23122 or affix Customer Number Bar Code Label here Practitioner(s) named below:					
Name		Registration Number			
					_
as my/our attorney(s) or agent(s) to pr Patent and Trademark Office connected		dentified above, and	to transact al	l business in the United St	ates
Direct all correspondence to:	Practitioners Customer N	lumber listed above:	OR		
	Correspondence Address		OK		
					
Name:					
Address:			T	·	
City: S	State:		Zip:		
Country:	Telephone:		Fax:		
I hereby declare that all statements mad belief are believed to be true; and furthe like so made are punishable by fine or ir jeopardize the validity of the application	er that these statements w mprisonment, or both, und	ere made with the kn ler 18 U.S.C. 1001 ar	owledge that	willful false statements and	I the
Name of Sole or First Invent	tor:	☐ A Petition has b	peen filed for	this unsigned inventor.	
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Sathya R.			Nara	yanan	
Inventor's Signature				Date:	
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Additional inventors are listed on the next page.					

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Daisaku		Komiya		
Inventor's Signature Duis du	Konnya		Date: <u>59/07/03</u>	
Residence: City: Yokohama-shi	State: Kanagawa	Country: Japan	Citizenship: Japan	
Mailing Address: 11-1-716 Ichibashimoc	ho			
Mailing Address: Tsurumi-ku				
City: Yokohama-shi	State: Kanagawa	Zip: 230-0024	Country: Japan	
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Rajesh B.		Khandelwal		
Inventor's Signature		Date:		
Residence: City: Bridgewater State: NJ		Country: USA	Citizenship: USA	
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Mailing Address:				
City: Bridgewater	State: NJ	Zip: 08807	Country: USA	
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Symeon		Papavassiliou		
Inventor's Signature		Date:		
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Mailing Address: 1275 15 th Street				
Mailing Address: Apartment 14Q	,			
City: Fort Lee	State: NJ	Zip: 07024	Country: USA	
Additional inventors are listed on 1 Supplemental Sheet(s).				

DECLARATION/POWER OF ATTORNEY - SUPPLEMENTAL SHEET

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Page <u>4</u> of <u>4</u>

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Sheng			Xu	
Inventor's Signature			Date:	
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Inventor's Signature			Date:	
Residence: City:	State:	Country:	Citizenship:	
Mailing Address:				
Mailing Address:				
City:	State:	Zip:	Country:	
Name of Additional Joint Inver	ntor, if any:	A Petition has been filed for this unsigned inventor.		
Given Name (first and middle	(if any))	Family Nar	me or Surname	
Inventor's Signature			Date:	
Residence: City: State:		Country:	Citizenship:	
Mailing Address:				
Mailing Address:				
City:	State:	Zip:	Country:	